PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000043984

RIVER CITY POOL LEAGUE, INC.

Principal Place of Business	Mailing Address				
10732 GOLDEN SPIKE LANE JACKSONVILLE FL 32257 US	P.O. BOX 56935 Jacksonville FL 32241 US				

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90130 044 ***150.00

Suite, Apt. #, etc. Suite, Apt. #, etc. \$5 Certificate of Status Desired. \$5.75 Additional											
JACKSONVILLE FL 32257	Principal Place	of Business	Mailing Address								
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City & State City & C	Suite, Apt. #, etc. Suite, Apt. #, etc.							5 - Certificate of Status Desired F			
Zip Country Zip Country Zip Country S. This corporation cover the current year intangable Yes No	22 27								Fee		
Zp	City & State City & State										
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 81 Name ROBERT M BIRD 10732 GOLDEN SPIKE LANE JACKSONVILEF I. 32257 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-name corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorated by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607,0502, Florida Statutes, the above-name corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607,0502, Florida Statutes, the above-name corporation's board of directors. I hereby accept the appointment as registered agent, and the provisions are directors and provisions are directors. I hereby accept the appointment as registered agent, and the provisions are directors. I hereby accept the appointment as registered agent, and the provisions are directors. I hereby accept the appointment as registered agent, and the provisions are directors. I hereby accept the appointment as registered agent, and the provisions are directors. I hereby accept the appointment as registered agent, and the provisions are directors. I hereby accept the appointment as registered agent, and the provisions are directors. I hereby accept the appointment as registered agent, and the provisions are directors. I hereby accept the appointment as registered agent, and the provisions are directors. I hereby accept the appointment as registered agent, and the provisions are directors. I hereby accept the appointment as registered agent, and the provisions are directors. I hereby accept and the provisions are directors. I hereby accept and appointment as registered agent, and the provisions are directors. I hereby accept and appointment are registered agent, and accept the obje	23	·								d to Fees	
9. Name and Address of Current Registered Agent ROBERT M BIRD 6114 GOODMAN RD. 10732 GOLDEN SPIKE LANE JACKSONVILLE FL 32257 41. Pursuant to the provisions of Sections 697.0502 and 607.1508. Florida Statutes. 42. Street Address (P.O. Biox Number is Not Acceptable) 43. City FL 85 Zip Code 44. City FL 85 Zip Code 45. Pursuant to the provisions of Sections 697.0502 and 607.1508. Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0506. Florida Statutes. 51GNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE DP NAME BIRD, ROBERT M STREET ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. NAME BIRD, ROBERT M STREET ADDRESS 10732 GOLDEN SPIKE LN 13. STREET ADDRESS 14. STREET ADDRESS 15. STREET ADDRESS 16. STREET ADDRESS 17. STREET A			—		ntry		1	•			
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

904880-8707